

Docket No. BROOK.1007
--------------------------

## Declaration and Power of Attorney For Patent Application

### English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

**SYSTEM AND METHOD FOR DISPLAYING AN IMAGE AND PLAYING AN ASSOCIATED MESSAGE**

the specification of which  
(check one)

- ☒ is attached hereto,
- ☐ was filed on \_\_\_\_\_ as United States Application No. or PCT International  
Application Number \_\_\_\_\_  
and was amended on \_\_\_\_\_  
(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)	Priority	Not Claimed
_____ (Number)                      (Country)                      (Day/Month/Year Filed)	<input type="checkbox"/>	<input type="checkbox"/>
_____ (Number)                      (Country)                      (Day/Month/Year Filed)	<input type="checkbox"/>	<input type="checkbox"/>
_____ (Number)                      (Country)                      (Day/Month/Year Filed)	<input type="checkbox"/>	<input type="checkbox"/>

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. *(list name and registration number)*

Oliver W. Hayes, Reg. No. 15,867

Norman P. Soloway, Reg. No. 24,315

Peter A. Nieves, Reg. No. 48,173

Peter W. Murphy, Reg. No. 43,822

Andrew Martin, Reg. No. 45,413

Kevin M. Drucker, Reg. No. 47,537

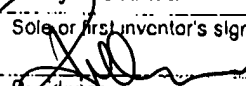
Ashley L. Kirk, Reg. No. 51,261

Todd A. Sullivan, Reg. No. 47,117

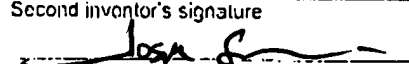
Send Correspondence to: Hayes Soloway PC  
175 Canal Street  
Manchester, NH 03101

Direct Telephone Calls to: *(name and telephone number)*

Peter A. Nieves 603.668.1400

Full name of sole or first inventor	<b>Rody Woodard</b>
Sole or first inventor's signature	
Residence	<b>6 Edgerly Place, Boston, Massachusetts 02116</b>
Citizenship	<b>USA</b>
Post Office Address	<b>same as above</b>

Date  
**2/11/04**

Full name of second inventor, if any	<b>Joseph Geringer</b>
Second inventor's signature	
Residence	<b>7 Kinsman Lane, Merrimack, New Hampshire 03054</b>
Citizenship	<b>USA</b>
Post Office Address	<b>same as above</b>

Date  
**02/11/04**

Full name of third inventor, if any

Timothy L. Trzepacz

Third inventor's signature

Date

Residence

19 Maverick Drive, Auburn, New Hampshire 03032

Citizenship

USA

Post Office Address

same as above

Full name of fourth inventor, if any

Stephen R. Lyman

Fourth inventor's signature

Date

Residence

3 Jump Lane, Hudson, New Hampshire 03051

Citizenship

USA

Post Office Address

same as above

Full name of fifth inventor, if any

Fifth inventor's signature

Date

Residence

Citizenship

Post Office Address

Full name of sixth inventor, if any

Sixth inventor's signature

Date

Residence

Citizenship

Post Office Address